



Latest Frontiers in Anticoagulation Therapy

Your key questions for 2018 clinical practice addressed



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Academic Medical
Center, Amsterdam



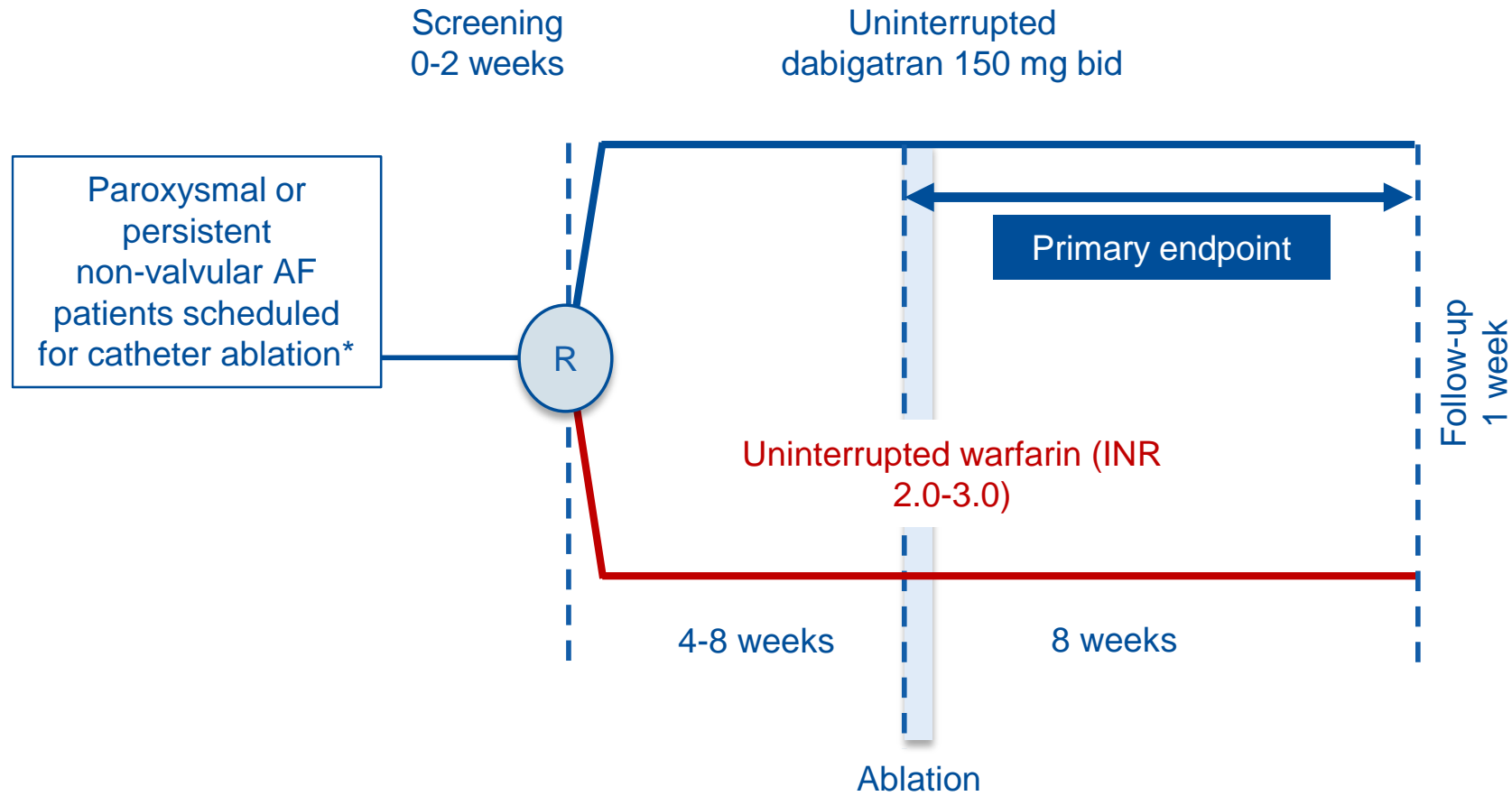
Anticoagulation 2017: the key lessons and implications from recent trials

John Eikelboom
McMaster University

Uninterrupted dabigatran versus warfarin in patients undergoing catheter ablation of AF

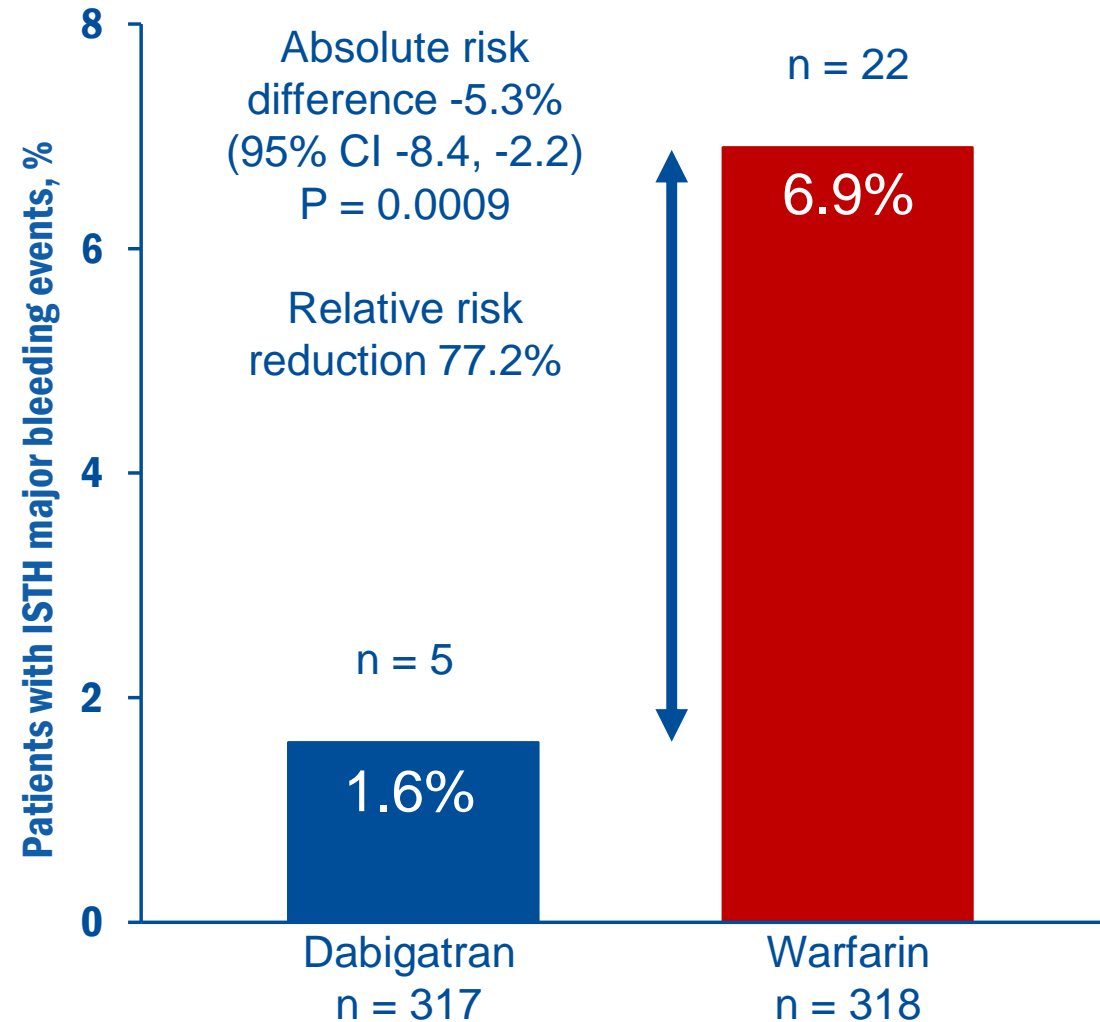
The RE-CIRCUIT Trial

Design



- **Primary endpoint:** incidence of adjudicated ISTH MBEs from venous access up to 8 weeks post-ablation[†]
- **Secondary endpoints** included adjudicated thromboembolic events from venous access to 8 weeks post-ablation[†]

Primary outcome: major bleeding



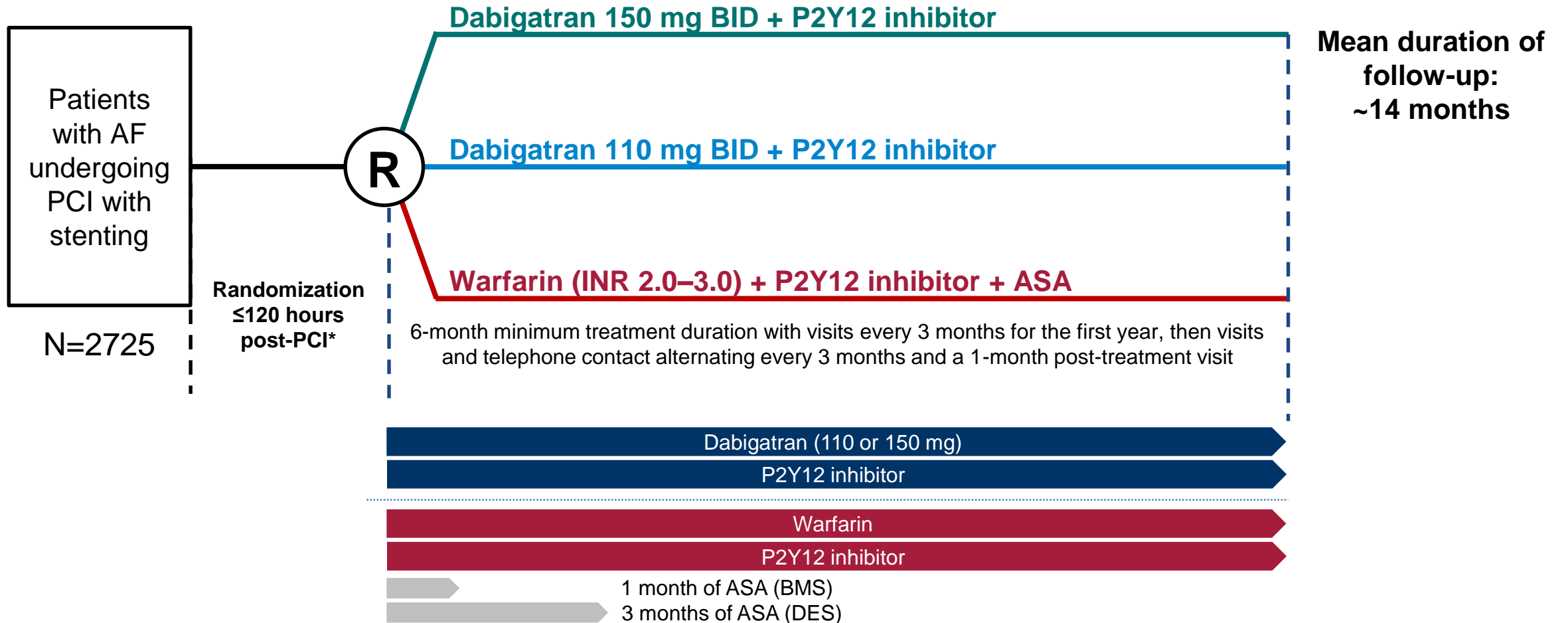
2017 HRS/EHRA/ECAS/APHRS/SOLAECE expert consensus statement on ablation of AF

Setting	Recommendation	Class	Level of evidence
Pre-ablation	Uninterrupted warfarin or dabigatran	I	A
	Uninterrupted rivaroxaban	I	B
	Uninterrupted NOAC other than dabigatran or rivaroxaban	IIa	B
During ablation	Heparin should be administered	I	B
Post-ablation	Continue anticoagulation for at least 2 months after ablation	I	C

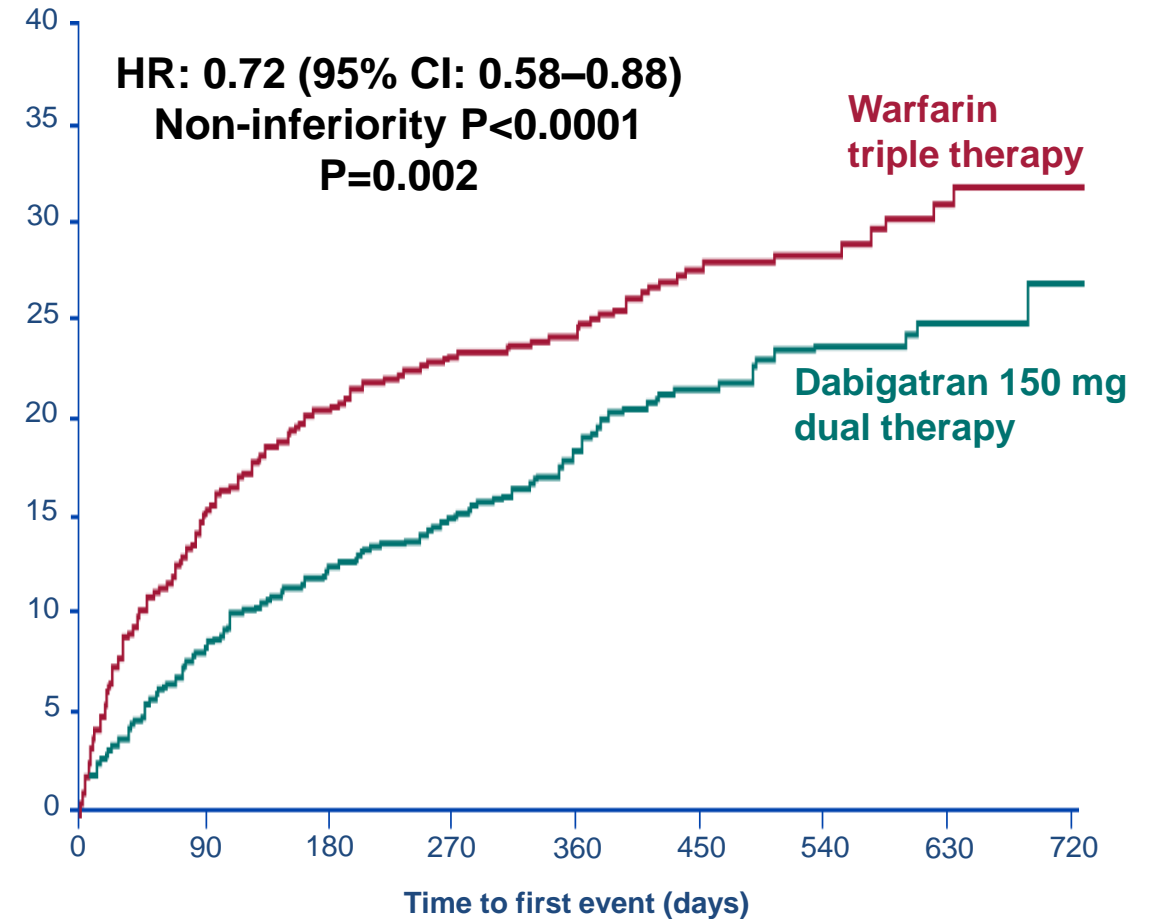
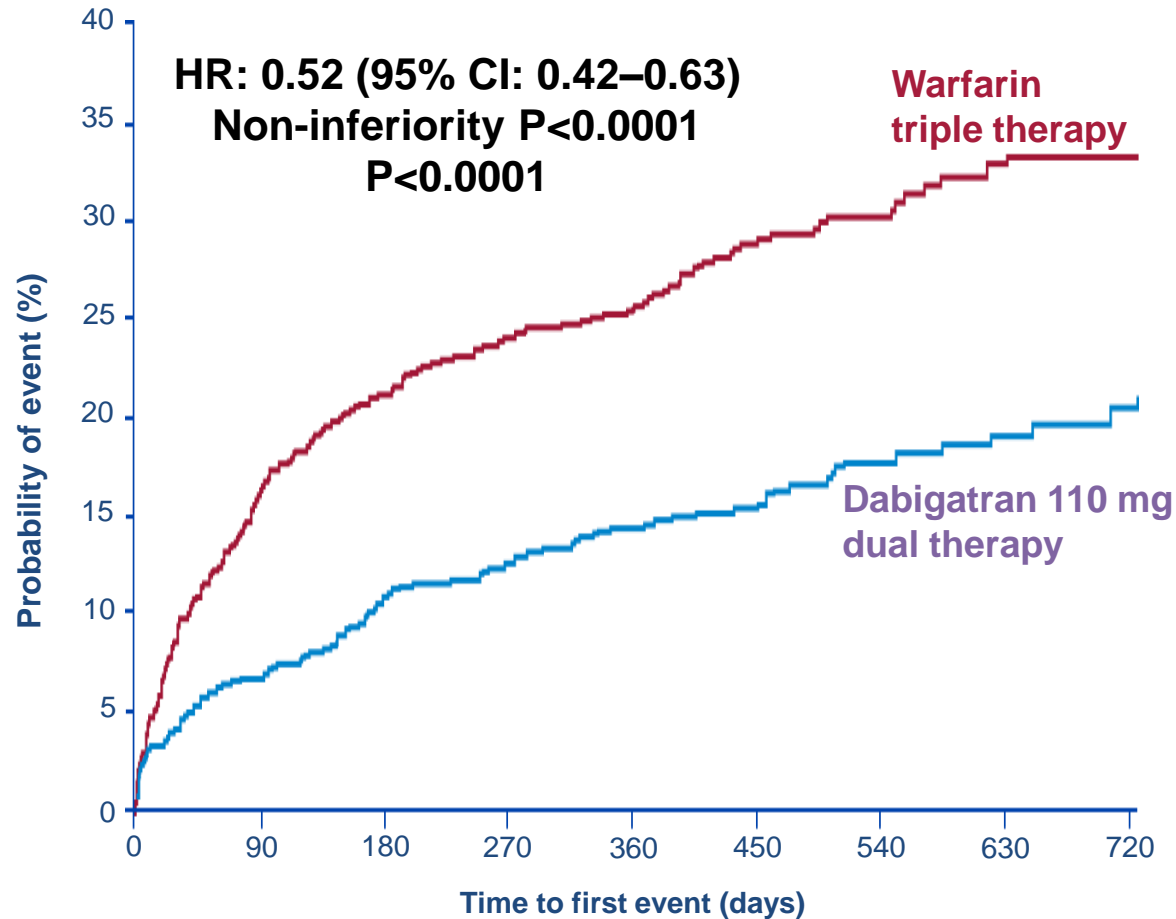
Dual antithrombotic therapy with dabigatran after PCI in patients with AF

The RE-DUAL Trial

Design



Primary outcome: major or CR non-major bleeding



Intracranial bleeding

